



## PRE-APPLICATION

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1. What funding are you applying for?

Select one of the following: CDBG; HOME; General Fund; General Fund Collaborative Partner

2. Service Address of the Program / Project. (1,000 characters)

3. **General Fund and General Fund Collaborative Partner:** What Population in Need are you proposing to serve based on the 2019 Community Needs Assessment? *Please refer to the "2019 Community Needs Assessment" located in the ZoomGrants Library at the top of this page.*

Select one of the following: People experiencing homelessness and/or housing crisis; Households with low and moderate income; Seniors who are isolated or have low household incomes; Youth who are isolated or have low household incomes; People living with mental health and/or substance use disorders; People living with physical and/or intellectual disabilities

4. **General Fund and General Fund Collaborative Partner:** The proposed request will support a program or service that best aligns with which Top Area of Need from the 2019 Community Needs Assessment? *Please refer to the "2019 Community Needs Assessment" located in the ZoomGrants Library at the top of this page.*

Select one of the following: Housing for All Incomes; Behavioral Health, Homelessness; Better Communication of Available Resources; Transportation; Social Isolation; Food Insecurity

5. **CDBG:** The proposed request for funding will support a program, service, or capital project that best aligns with which of the following National Objective categories? *Please review the "CDBG National Objectives" located in the ZoomGrants Library at the top of this page.*

Select one of the following: Low and Moderate Income: Area Wide; Low and Moderate Income: Limited Clientele; Low and Moderate Income: Housing; Low and Moderate Income: Jobs; Slum and Blight: Target Area; Slum and Blight: Spot; Slum and Blight: Urban Renewal; Urgent Need

**6. General Fund Collaborative Partner:** Is this a Collaborative Partner Application? A Collaborative Partner program brings multiple agencies together to address an identified need with each agency receiving funding from the City of Chandler for the same project.

Select one of the following: Yes; No

**7. General Fund Collaborative Partner:** Please list your collaborative partner(s) that is / are working with you to address the same need with Chandler funding. Describe your partner(s) roles, responsibilities, and contributions. (5,000 characters)

**8. General Fund Collaborative Partner:** Describe the enhancements and efficiencies that are achieved through the collaboration. Are you decreasing duplication? (5,000 characters)

**9. General Fund and General Fund Collaborative Partner:** Please explain your involvement with City of Chandler programs and For Our City Chandler. (5,000 characters)

**10. General Fund and General Fund Collaborative Partner:** Have you signed and uploaded the Certification list of documents to the Documents Tab required for application eligibility for General Funds? This certification includes all of the General Fund eligibility requirements. *The Certification for General Fund Applicants can be downloaded from the ZoomGrants Library at the top of this page.*

Select one of the following: Yes; No

**11. CDBG and HOME:** Have you signed and uploaded the Certification list of documents to the Documents Tab required for application eligibility for CDBG/HOME? This certification includes all of the CDBG and HOME eligibility requirements. *The Certification for CDBG/HOME Applicants can be downloaded from the ZoomGrants Library at the top of this page.*

Select one of the following: Yes; No

## **APPLICATION – PROGRAM & PROJECT TAB**

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### Program & Project

1. What funding are you applying for?

Select one of the following: CDBG Public Service; CDBG Neighborhood Revitalization; CDBG Capital Project; HOME; General Fund

## Program Summary

2. **Updated!** Identify the unmet need in the Chandler community. *(3,000 characters)*
3. **Updated!** Describe the impact the proposed program will have on the clients served and how this will benefit the Chandler community. *(5,000 characters)*
4. **General Fund:** Describe how the program will meet the eligibility criteria for funding. *Your response should explain the Top Area of Need and Target Population selected. (5,000 characters)*
5. **CDBG and HOME:** Describe how the program will meet the eligibility criteria for funding. *Your response should explain how your program meets the National Objective and how it relates to the Consolidated Plan goal. The "Consolidated Plan" is located in the ZoomGrants Library at the top of this page. (5,000 characters)*
6. Identify the target population to be served. *(255 characters)*
7. Number of \*unduplicated\* persons to be served by the program from July 1, 2022 - June 30, 2023. *Each number should be less than or equal to the number shown for the "Total clients to be served (by the proposed program) from all fund sources".*

Total clients to be served (by the proposed program) from all fund sources; Total Chandler clients to be served (by the proposed program) from all fund sources; and Total Chandler clients to be served with Chandler funds requested.

8. Number of \*unduplicated\* households to be served by the program from July 1, 2022 - June 30, 2023. *Each number should be less than or equal to the number shown for the "Total households to be served (by the proposed program) from all fund sources".*

Total households to be served (by the proposed program) from all fund sources; Total Chandler households to be served (by the proposed program) from all fund sources; and Total Chandler households to be served with Chandler funds requested.

9. Estimate the projected number of persons to be served by age with Chandler funds.

List within the following categories: 0-17; 18-24; 25-61; 62+

10. Estimate the projected number of persons to be served by Area Median Income (AMI) with Chandler funds. *Refer to the Current Area Median Income (AMI) table located in the ZoomGrants Library at the top of this page.*

List within the following categories: 0-30% AMI; 31-50% AMI; 51-80% AMI; 81%+ AMI

11. Describe the geographic area to be served with Chandler funds. *Be as specific as possible, including zip codes, census tracts, etc. (255 characters)*

### Experience

12. What is your organization's mission? What core services are provided? *(5,000 characters)*

13. Describe the role and level of involvement of your Governing Board. *This may include frequency of board meetings; approval and oversight of policies and procedures; and board subcommittee structure (e.g. audit committee, fundraising and development, etc.). (3,000 characters)*

14. **NEW!** How does your organization practice Diversity, Equity and Inclusion (DEI) amongst its staff and board? *Please upload your organization's DEI policies and procedures in the Documents Tab. (5,000 characters)*

15. How many years has your organization been providing the proposed program or service? Detail the current staff experience to support this project. *(5,000 characters)*

16. How do you ensure client safety? Describe any training or certifications that you require. *(5,000 characters)*

### Service Delivery

17. How do clients access your organization's programs or services? *(255 characters)*

18. **New!** How are Diversity, Equity and Inclusion (DEI) practices implemented in the delivery of programs and services? *(5,000 characters)*

19. Describe how services are delivered. How has service delivery changed as a result of the coronavirus pandemic (if applicable)? *(5,000 characters)*

20. What unit of service do you use to measure performance?

Select the service that best applies: 1 basic need service (e.g. food box, toiletry pack, clothing); 1 hour of service (e.g. case management, training, volunteer hour, class hour); 1 payment (e.g. rent, admission into program, scholarship); 1 transportation / transit (e.g. bus ticket, ride); 1 admission (e.g. intake, medical appointment, tax return, code violation); 1 bed night; 1 housing rehabilitation and/or acquisition; 1 capital project improvement

21. Enter the projected number of units of service as described in Question #20 for the proposed program or service from July 1, 2022 - June 30, 2023. *Numbers Only. (255 characters)*

22. Fund sources are always changing. How does your organization plan for sustainability to ensure continued service delivery? *(5,000 characters)*

23. **General Fund: New!** If the City of Chandler has additional funds to allocate above the anticipated funding available, how would your organization utilize these funds, and what amount is needed? *(500 characters)*

#### Leveraging Resources

24. Describe how volunteers are used in your program. If this has been significantly impacted by the coronavirus pandemic, please describe. *(3,000 characters)*

25. Describe how your organization collaborates with other organizations and / or government entities to make a positive impact to the Chandler community. *(5,000 characters)*

26. What other resources does your organization leverage to improve service delivery? *(3,000 characters)*

#### **CDBG and HOME Questions**

27. List the organization's five (5) most recent CDBG or HOME funded projects, including the grantor, award amount, brief project description, year, and total number served. *(8,000 characters)*

28. List any project with unspent funds and monitoring or audit findings for any CDBG or HOME funded projects from the past 5 years. *(255 characters)*

29. Are there any known adverse environmental conditions on the proposed site? If so, what are they and can they be mitigated through reasonable measures? *(255 characters)*

30. If there are any on-site structures subject to historic preservation requirements, briefly state how you plan to comply with applicable historic preservation requirements. *(255 characters)*

31. **New!** Section 3 provides employment and / or job training opportunities for low-income individuals. In addition, HUD urges contracting with Minority-owned Business Enterprise (MBE) or Women-owned Business Enterprise (WBE) firms. Do you have an outreach plan

for Section 3 and MBE/WBE? *This will be a contract requirement for future funding if Section 3 or MBE/WBE is triggered by the proposed program. Please upload your organization's outreach plans for Section 3 and MBE/WBE in the Documents Tab*

Select one of the following: Yes; No

32. **New!** If Section 3 or MBE/WBE is triggered by the proposed program, briefly describe the steps you will take to offer opportunities to Section 3 individuals, Minority-owned Business Enterprises and Women-owned Business Enterprises. *(5,000 characters)*.

### **CDBG Capital Projects**

33. Does the current zoning conform to your proposed use of the project site? Are there any deed restrictions, land covenants, etc. that would prevent use of the site as proposed? Describe any land use restrictions and how you plan to overcome them. *(255 characters)*

34. Will this proposed project result in any temporary or permanent displacement of residents? If so, describe your process to mitigate displacement. *(255 characters)*

35. Describe the substandard or deficient condition(s) present at the site and how they impact functionality or otherwise negatively impact operations. Provide relevant data to support your assessment. *(255 characters)*

36. Describe the level of experience your organization has in preparing HUD funded scopes of work, invitations to bid, contractor procurement and Davis-Bacon wage rates. *(5,000 characters)*

### **HOME Questions**

37. HOME funding requires a 25% match. List the required match amount and source(s). *(255 characters)*

38. Describe the market demand and probable success of the activity. What measures will be taken to ensure initial and continued affordability? *This question only applies to Homeownership and Rental Projects. Please answer "N/A" if applying for another type of HOME project. (3,000 characters)*

39. Describe the proposed site or neighborhood and your considerations for selection. *(255 characters)*